								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								3691828891					
CLAIMS AS FILED - PART I								SMALI			رع		
(Column 1)						(Column 2)			ב ה	31114	OR	OTHER SMALL	
TC	TAL CLAIMS		47				1	RATI		FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 355.00		OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			42 minus 20=		• 22			X\$ 9=			OR	X\$18=	296
INDEPENDENT CLAIMS			5 minus 3 =		Z			X40=			OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=				070	160
* If the difference in column 1 is less than zero, enter "0" in column 2						ı				OR	+270=	- 1	
OLAIMO AO AMENDES DASTI								TOTA	L		OR	TOTAL	1266
	CLAIMS AS AMENDED - PART !! (Column 1) (Column 2) (Column 3							SMAI	LL E	ENTITY	OR	OTHER SMALL	
		CLAIMS REMAINING		HIGH	EST		1			ADDI-	1		ADDI-
AMENDMENT A		AFTER AMENDMENT		PREVIO	DUSLY	PRESENT EXTRA		RATE	E	TIONAL FEE		RATE	TIONAL FEE
	Total	. 36	Minus	4	2	,		X\$ 9:	-	1 11	OR	X\$16=	, ,
MEN	Independent	. 4	Minus	•••	5	3		X40=			OR	X80≈	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								ᅥ		5		
			٠				ı	+135			OR	+270=	
								TOT ADDIT, F			OR	TOTAL ADDIT, FEE	·
	(Column 1) (Column 2) (Column 3)												
8		CLAIMS REMAINING		HIGH	BER	PRESENT EXTRA	ì	RATE	٦	ADDI- TIONAL		RATE	ADDI-
Ę		AFTER AMENDMENT		PREVIO			П		■		ii		TIONAL
풀		AMENUMENT			POH		lł		┪	FEE			FEE
AMENOMENT	Total Independent		Minus Minus	**		-		X\$ 9=	4		OR	X\$18=	
AM		FIRST PRESENTATION OF MULTIPLE DEPENDEN			CLAISA		l	X40=	٠		OR	X80=	
_							۱ ۱	+135=	.]		OR:	+270=	
								TOT		-	OR	TOTAL	
	(O.)								EEL		JOH ,	ADDIT, FEE	
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								_	4501	•		
10		REMAINING AFTER		NUM PREVIO		PRESENT EXTRA		RATE		ADDI- TIONAL		RATE	ADDI- TIONAL
EN		AMENDMENT		PAID		EXIMA	L	HAIE		FEE		MAIL	FEE
AMENDMENT C	Total	•	Minus	••		=	lſ	X\$ 9=	. [OR	X\$18=	
ME	Independent	•	Minus	•••		3	lt	X40=	1			X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ŀ	,,, ₀ =	+		OR	7,000	
l			a anta la cata					+135=			OR	+270=	
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE TOTAL ADDIT, FEE OR ADDIT, FEE													
		ber Previously Pai					: !cu	nd in the	app	ropriate box	in col	umn 1.	

FORM PTO-875 (Rev. 8/00)

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